

Health & Safety Manual

Supplement 2.04

Directorate Environment, Safety, and Health Self-Assessment Program

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Approved by the ES&H Working Group

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**Directorate Environment, Safety,
and Health Self-Assessment Program***

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Directorate Environment, Safety, and Health Self-Assessment Program

1.0 Introduction

The Laboratory's policy is for each directorate to develop and conduct environmental, safety, and health (ES&H) Self-Assessment Programs.

An ES&H self-assessment is a process by which directorates formally evaluate and document compliance with ES&H requirements (and quality assurance processes that are applied to ES&H activities) specified in the *Health & Safety Manual*, the *Environmental Compliance Manual*, and the *Quality Assurance Program*. The Assurance Review Office (ARO) and authorized external auditors have access to directorates' self-assessment processes and products as part of their independent assessment and appraisal functions.

Each directorate strengthens its management of operations and facilities by periodically conducting self-assessments. Deficiencies discovered during formal self-assessments shall be documented and tracked consistent with the requirements in the *DefTrack Policies and Procedures Manual*, which is maintained by the ARO. Corrective actions shall be scheduled and resolved.

This supplement provides requirements and guidance for preparing directorate Self-Assessment Plans. The ES&H Working Group periodically reviews and revises this supplement to reflect changes in Laboratory requirements and guidance. *This supplement does not apply to Plant Operation's management reviews of the institutional support provided by its ES&H organizations or the Laboratory's wider ES&H assessment activities, including informal assessments.*

The objectives of the ES&H Self-Assessment Program are to ensure

- Laboratory directorates comply with applicable ES&H-related LLNL policies and procedures.
- ES&H-related requirements are integrated into all levels of facility, management, and operational activities.
- ES&H-related deficiencies are identified and analyzed in a timely manner and managed in order to minimize their occurrence or recurrence.

2.0 Requirements for Self-Assessment Programs

2.1 ES&H Self-Assessment Plan

Each directorate is to develop a written plan for assessing ES&H issues associated with its organizations, facilities, and operations. Directorates may develop subsidiary department or division Self-Assessment Plans at their discretion. The directorate plan is to be approved by the associate director and shall be reviewed annually and modified as necessary. Self-Assessment Plans may reference the *Health & Safety Manual*, the *Environmental Compliance Manual*, approved quality assurance (QA) plans, safety analysis reports (SARs), facility safety procedures (FSPs), and operational safety procedures (OSPs).

Plan Structure. A Self-Assessment Plan is a management-approved document that describes a directorate's formal self-assessment activities, provides a schedule for completing the assessments, and identifies the documents to be generated. Each directorate-level plan must contain

- A. **Title:** [Organizational entity name] Self-Assessment Plan
- B. **Date**
- C. **Background** [optional]
- D. **Scope.** The plan must encompass the following:
 - All of the directorate's facilities and operations.
 - Hazard types and classifications associated with specific facilities and operations. [Note: Information on specific hazards can be found in a variety of documents such as facility safety procedures (FSPs), safety analysis reports (SARs), and environmental assessments (EA).] Appendix B shows an example of how to list the hazards for a facility.
 - Applicable directorate-specific self-assessments required by Laboratory policies.
 - Applicable directorate-specific self-assessments required in Implementation Plans for rules, regulations, and orders.
 - Items on the Self-Assessment Focus Areas List.¹
- E. **Responsibilities and authorities.** Describe the ES&H responsibilities for associate directors, managers, and employees involved in carrying out self-assessment activities. For facilities that are shared, define the self-assessment responsibilities for the landlord and tenant either in the Self-Assessment Plan or in other documents.

¹The ARO, assisted by the ES&H support organizations, compiles a list of the minimum set of items to be considered when reviewing the directorate Self-Assessment Program. This list is maintained by the ARO and approved by the ES&H Working Group annually.

- F. Frequency of formal self-assessments.** The frequency for self-assessments will depend on the hazards and risks being managed. Self-assessments of facilities and operations shall be based on the risks involved, but shall *not be less than once every 3 years*.
- G. Reporting.** Include a statement of how assessments and the annual report will be documented.
- H. References.** List applicable external, Laboratory, and directorate documents used as references in the Self-Assessment Plan.

2.2 Guidance for Conducting Self-Assessments

The form and depth of an assessment depends upon the identified hazards and risks associated with the facility or operation being assessed.

2.2.1 Assessment Activities

A self-assessment is a process by which an organization evaluates its compliance with requirements. Formally structured self-assessments are scheduled and documented appraisals, assessments, and inspections of facilities and operations. They are conducted by or for management at frequencies commensurate with the hazards involved. Findings from these assessments are evaluated, the results are documented, and deficiencies and corrective actions noted are entered into the Laboratory's deficiency tracking (DefTrack) system.

There are various types of formal self-assessments conducted at the Laboratory. These may include

- Management reviews of ES&H activities related to organizational structure and operations (e.g., Conduct of Operations; commitments listed in SARs, TSRs, FSPs, and OSPs).
- Inspections conducted by facility managers of work areas and reviews of operations.
- Inspections conducted by area supervisors of work areas and reviews of operations.
- Laboratory or directorate safety committee inspections.
- Inspections and reviews conducted by Hazards Control, the Environmental Protection Department, and Plant Engineering personnel with expertise in ES&H.
- Inspections and reviews performed on behalf of the associate director to assess directorate compliance.

Self-assessment activities can be performed either by a team of individuals or by a single person. Individuals involved in such activities must understand the operations being assessed and their requirements and associated hazards.

Assistance can be obtained from ES&H support organizations or outside contractors and consultants selected by the directorate.

NOTE: Situations discovered and determined to be highly dangerous require special attention. Imminently dangerous situations (DefTrack priority 1A) must be mitigated immediately. Situations considered serious (DefTrack priority 1B) must be mitigated within 5 working days of discovery. Imminently dangerous and serious situations must always be reported, even if they have been mitigated. (For additional information on managing findings, see the *DefTrack Policy and Procedures Manual*.)

2.2.2 Updating Plans and Procedures

Lessons learned from self-assessments are used to revise or update plans and procedures (e.g., management plans, QA plans, FSPs, and OSPs). As appropriate, lessons learned should be shared among directorates to enhance the overall quality of Laboratory operations.

2.2.3 Maintaining Assessment Records

Sufficient documentation of self-assessment activities is to be developed and maintained to substantiate the activity's scope, findings, and conclusions expressed in the Annual Self-Assessment Report. Assessment records shall include a statement of the scope of assessment activities and an evaluation of and conclusions for any findings. Such documentation shall be retained for a minimum of four years, or consistent with other specific requirements, and is to be made available to the ARO and authorized auditors upon request.

The date the assessment was completed, the names of the organization or individuals who performed the assessment, deficiencies found, as well as any other pertinent information are to be entered into the DefTrack system. (NOTE: It is possible to perform an assessment and not uncover any deficiencies. In such cases, enter all the required information and note that "no findings" were uncovered.)

2.3 Annual Self-Assessment Report

An Annual Self-Assessment Report is to be developed for directorate self-assessment activities. As a minimum, this report shall include

- A determination of whether the commitments established in the directorate's Self-Assessment Plan were met.
- A list of self-assessment activities undertaken in support of the directorate's plan.
- A summary of the status of items entered into the DefTrack system during the assessment period.
- An evaluation of findings as well as any trends identified. If trends are identified, include an analysis of the underlying factors.

3.0 Responsibilities

3.1 Associate Directors

Associate directors are responsible for ensuring that their directorate complies with ES&H requirements and approving their directorate's Self-Assessment Plan..

3.2 Managers

Consistent with the directorate Self-Assessment Plan, managers are responsible for assessing their assigned operations and facilities. Managers are also responsible for seeing that corrective actions are implemented or resolved.

3.3 Assurance Managers

Assurance managers are responsible for assisting in the development of directorate ES&H Self-Assessment Plans, providing oversight of directorate facilities and operations to assure proper implementation of the ES&H program within the directorate, and performing independent assessments of the ES&H Program within the directorate.

3.4 Employees

All employees should be encouraged to identify ES&H deficiencies and to provide input for their remediation.

3.5 ES&H Support Organizations

ES&H support organizations shall notify the affected directorate of institutional assessments and inspections they are conducting and provide a copy of the resulting reports to the directorate assurance manager.

4.0 LLNL Contacts

Contact the following as necessary for additional information about this supplement:

- Assurance Review Office.
- Directorate Assurance Offices.
- ES&H Working Group.
- ES&H Teams.

Appendix A

Terms and Definitions

associate director (AD)	LLNL's management hierarchy consists of the Director, Deputy Directors, and associate directors. ADs report to the Director.
assurance manager	Each AD appoints an assurance manager who is responsible for providing oversight of ES&H activities within the directorate and assisting the AD in developing plans and procedures to assure that all directorate activities are performed in conformance with LLNL's ES&H policies. Assurance managers serve on the ES&H Working Group.
assurance review office (ARO)	The ARO provides an independent, internal ES&H appraisal program to assure that the Laboratory's ES&H policies and their implementation are consistent with Laboratory requirements, DOE orders, and ES&H regulations.
deficiency tracking (DefTrack) system	A formal, documented management system used to record and monitor the status of ES&H-related deficiencies identified during inspections, appraisals, assessments, reviews, and audits conducted by DOE or internal or external agencies.
facility safety procedure (FSP)	A management-approved document that defines responsibilities for safe operations in an LLNL facility, describes the hazards, and provides the basic safety rules to control these hazards. FSPs describe safety and environmental controls for long-term activities in facilities, and are required for each non-excluded hazard-ranked facility or group of facilities. (See Supplement 2.02 for further details.)
hazard classification	A method for evaluating the relative importance of hazards according to their potential impact on the health and safety of employees, members of the public, and the environment. In classifying hazards, no credit is taken for mitigation of the potential impacts.

operational safety procedure (OSP)	A management-approved written procedure that defines the necessary steps to be taken so that work with potentially hazardous experiments and operations can be conducted safely. NOTE: If an activity will take place in a facility covered by an FSP, then the OSP will either add to or limit the authorization provided by that FSP.
quality assurance plan (QAP)	A management-approved document that contains the quality objectives for an activity or facility and describes the methods that will be used to assure the achievement of the quality assurance goals.
risk	A qualitative or quantitative statement that describes the importance of potential damage, injury, or loss due to a hazardous event or agent, taking into account the severity of the consequences and the likelihood of occurrence.
self-assessment	A self-assessment is a process by which an organization evaluates its compliance with requirements. This process may include inspections, audits, appraisals, surveys, and reviews. All of these activities are designed to obtain information regarding the applicability and effectiveness of operating processes and procedures.
self-assessment focus areas list	This list contains a minimum set of items to be considered when preparing directorate Self-Assessment Plans. It is approved by the ES&H Working Group and maintained by the Assurance Review Office.

Appendix B

Hazard Identification Example

Following is an example of how to list a facility's hazard classification and the types of hazards identified within that facility. Assistance with determining the facility's hazard classification and identifying significant hazards and risks can be obtained from ES&H subject-matter experts available through the directorate's assurance manager or LLNL ES&H support organizations.

Facility	Hazard classification				Hazard type		
	General or Excluded	High	Moderate	Low	Radiation	Chemical	Equipment
123	X						X
456		X			X		X
890			X			X	X
935				X			X